**Federal Election Commission** 

#### RECEIVED

April 15, 2014

Re: Q1 3x filing for Coo534016

2014 APR 28 AM 11: 54

FEC MAIL CENTER

Sir or Madam,

Our group, still in the planning stage, has still not received or disbursed any funds. In this report, as in previous 3x reports, I put "zeroes" in the appropriate boxes.

Schedules H through L appear to be forms that are not necessary for our group to fill out. On each of the pages in H through L, I put the committee name at the top of the page, and left the rest of the page blank.

If any changes need to be made in the way I've been filing the reports, please call or email me.

Yours very truly,

John Hilt

4051 S. Sacramento, #2F Chicago, IL 60632 312-671-0909 jhilt95@yahoo.com

**FEC** FORM 3X

Office

Use

Only

FE6AN026

#### REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED

2014 APR 28 AM 11: 54

**FEC FORM 3X** 

Rev. 12/2004

Office Use Only TYPE OR PRINT ▼ Example: If typing, type NAME OF 12FE4M5 over the lines. COMMITTEE (in full) Expossing Mairxisits PAC ADDRESS (number and street) Check if different than previously reported. (ACC) CITY A STATE A 2. FEC IDENTIFICATION NUMBER ▼ ZIP CODE A 3. IS THIS NEW **AMENDED OR** REPORT (N) (A) 4. TYPE OF REPORT Nov 20 (M11) Monthly. Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (Non-Election Year Only) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report (Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 **PRE-Election** Quarterly Report (Q2) Convention (12C) Report for the: Special (12S) October 15 Quarterly Report (Q3) in the January 31 Election on State of Year-End Report (YE) July 31 Mid-Year (d) 30-Day Report (Non-election **POST-Election** General (30G) Runoff (30R) Special (30S) Year Only) (MY) Report for the: Termination Report in the (TER) Election on State of through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Date Signature of Treasurer NOTE: Submission of false, erroreous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE** OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Marxists Report Covering the Period: From: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 0.0.0 January 1, (b) Cash on Hand at 0.0.0.0 Beginning of Reporting Period..... 0.0.0. (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 0.0.0.0 6(a) and 6(c) for Column B) ..... 0.0.0.0 7. Total Disbursements (from Line 31)...... Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) ...... Debts and Obligations Owed TO the Committee (Itemize all on 0.0.0.0 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) ..... This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW

Washington, DC 20463

Toli Free 800-424-9530 Local 202-694-1100

# 14031231473

#### **DETAILED SUMMARY PAGE**

of Receipts

	FEC Form 3X (Rev. 06/2004)	or Receipts	Page <b>3</b>
	Vrite or Type Committee Name		
	Exposing Marxist	s PAC	•
R	eport Covering the Period: From:	0.1 2.0.1 4 To:	03 31 2014
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees  (i) Itemized (use Schedule A)	0.0,0,0	0.0.0.0
	(ii) Unitemized(iii) TOTAL (add	0.0.00	0.0.0.0
	Lines 11(a)(i) and (ii)	00.0.0	0.000
	(b) Political Party Committees	0.0-0.0	
	(such as PACs)(d) Total Contributions (add Lines		0.0.0.0
	11(a)(iii), (b), and (c)) (Carry  Totals to Line 33, page 5)	0.0.0.0	0.0.0.0
12.	Transfers From Affiliated/Other Party Committees	0.0.00	0.0.0.0
13.	All Loans Received	0.0.0.0	
	Loan Repayments Received Offsets To Operating Expenditures	0.0.0.0	0.0.0.0
16.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made		0.0.0.0
17	to Federal Candidates and Other Political Committees Other Federal Receipts	0.0.0	0.0.0.0
	(Dividends, Interest, etc.)	0.0_0.0	,0,0,0,6
	(a) Non-Federal Account (from Schedule H3)	0.0.0.0	0.0.0.0
	(b) Levin Funds (from Schedule H5)	0.0.0.0	0.0.00
	(c) Total Transfers (add 18(e) and 18(b))	0.6.6.0	0.0.0.0
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	Λ Λ Λ Λ	λ Λ <sub>Λ</sub> Α
20	Total Federal Receipts		
	(subtract Line 18(c) from Line 19)	Gnno	ስለለበ

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
	(i) Federal Share	.0.0.0.0	0.0.0.0
	(ii) Non-Federal Share	0.0.0	2022
	(b) Other Federal Operating		
	Expenditures	6.0.0.6	0.0.0.0
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	0 0 G K	0000
22.	Transfers to Affiliated/Other Party		
23	Contributions to	L. L. D. O.	L
20.	Federal Candidates/Committees and Other Political Committees	0000	
	Independent Expenditures		
25.	(use Schedule E)	0.0.00	<u> </u>
	(2 U.S.C. §441a(d)) (use Schedule F)	00.00	.0000
26.	Loan Repayments Made	0.000	
27.	Loans Made	0.0.00	0.000
28.	Refunds of Contributions To: (a) Individuals/Persons Other		
	Than Political Committees		
	(b) Political Party Committees	0.000	
	(c) Other Political Committees	0000	
	(such as PACs)		
	(d) Total Contribution Refunds		
	(adt Lines 2B(a), (b), and (c))▶		<u> </u>
29.	Other Disbursements	0.0-00	00.00
	E 1 15 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Annual Committee of the Control of t
30.	Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity		
	(from Schedule H6)		
	(i) Federal Share	0000	0.000
	(ii) "Levin" Share	0000	00:00
	(b) Federal Election Activity Paid Entirely	0.000	
	With Federal Funds		
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.000	0.0.00
31.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))		<u> </u>
32.	Total Federal Disbursements		
	(subtract Line 21(a)(il) and Line 30(a)(ii)		00.00
	from Line 31)		Les on a volume

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 5 COLUMN A III. Net Contributions/Operating Ex-COLUMN B **Total This Period** Calendar Year-to-Date penditures 33. Total Contributions (other than loans) (from Line 11(d), page 3) ..... 34. Total Contribution Refunds (from Line 28(d))..... 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) ..... 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ........▶ 37. Offsets to Operating Expenditures (from Line 15, page 3)..... 38. Net Operating Expenditures 

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE OF
IT	EMIZED RECEIPTS		for each category of the	(check only one)
		•	Detailed Summery Page	11a 11b 11c 12 13 14 15 16 17
A	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements ma	ay not be sold or used by any pe	rson for the purpose of soliciting contributions to solicit contributions from such committee
K	NAME OF COMMITTEE (In Full)			The state of the s
	Exposing Marxists	PAC		
	Full Name (Last, First, Middle Initial)			Date of Receipt
A.	Mailing Address			Date of necept
		State	Zip Code	- Lancolina Lanc
	City	State	zih ooge	Amount of Each Receipt this Period
	FEC ID number of contributing	C		
	federal political committee.			
	Name of Employer	Occupation		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼			
_		landa miles		
В.	Full Name (Last, First, Middle Initial)			Date of Receipt
	Mailing Address			Lag / Lag / London
	City	State	Zip Code	
				Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		
	Name of Employer	Occupation		
	Receipt For:	Aggregate	Year-to-Date ▼	1
	Primary General	7-9-3-		
	Other (specify) ▼		ALLALIALI	
_	Full Name (Last, First, Middle Initial)			Date of Bearing
C.	Mailing Address			Date of Receipt
	City	State	Zip Code	
				Amount of Each Receipt this Period
	FEC ID number of contributing	C	and the second district of the second distric	
	federal political committee.	in a land and a second	den de la constant de	
	Name of Employer	Occupation		
	Receipt For:	Aggregate `	Year-to-Date ▼	1
	Primary General Other (specify)	Annual Property of the Party of		
_				
۽	UBTOTAL of Receipts This Page (optional)			0000
┝				
T	OTAL This Period (last page this line number of	วกโy)		0.0.00

SCHEDULE B (FEC FORM 3X)	Use separate schedule(s)	FOR LINE		PAGE OF
ITEMIZED DISBURSEMENTS	for each category of the	(check only	one) 22 23	24 725 726
	Detailed Surnmary Page	27	28a 28b	
Any information copied from such Reports and Staten or for commercial purposes, other than using the name	nents may not be sold or used	by any person	on for the purpose	of soliciting contributions
NAME OF COMMITTEE (In Full)	to the discountry positive	OSTATION (C	Solidit Contribution	s non such commutee.
Exposing Marxists	PAG			
Full Name (Last, First, Middle Initial)  A.			Date of Disburs	ement
<b>~</b>			Date of Disbuts	
Mailing Address				
City	State Zip Code			
Purpose of Disbursement		7220	Amount of Each	Disbursement this Period
Candidate Name		Category/ Type		
Office Sought: House Disburser				inn on the market former houseast has edge the good former and
<b>1</b> — -	Primary General Other (specify) ▼			_
State: District:	Carier (Specify)			·
Full Name (Last, First, Middle Initial)				
В.			Date of Disburs	
Mailing Address				· V
City	tate Zip Code	-		
Purpose of Disbursement				
Candidate Name		and an artist of the second		Disbursement this Period
·	(	Category/ Type		
Office Sought: House Disbursem	<del></del>			·
	Primary General  Other (specify) ▼		-	
State: District:				
Full Name (Last, First, Middle Initial)				
<b>.</b> .			Date of Disburse	ment .
Mailing Address				
City	tate Zip Code			
Purpose of Disbursement			Amount of Each	Disbursement this Period
Candidate Name	C	Category/		Propose near this rend
Office Sought: House Disburseme	ent For:	- 77-	i melione desselland	
	Primary General			
State: District:	Other (specify)			
SUBTOTAL of Disbursements This Page (optional)				0,0,0,0
TOTAL This Period (last page this line number only)		······		0.0.00

## SCHEDULE C (FEC Form 3X)

OANS	Use separate schedule(s) PAGE OF
	for each category of the Detailed Summary Page FOR LINE 13 OF FORM 3X
IAME OF COMMITTEE (In Full)	
Exposing Marxists PAC	
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election:
·	Primary General
Mailing Address	Other (specify)
, maining rices, so	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
City State ZIP	Code
Original Amount of Loan Cumulative Payment	To Date Balance Outstanding at Close of This Period
TERMS	
Date Incurred Date D	Interest Rate Secured:  % (apr)  Yes No
List All Endorsers or Guarantors (if any) to Loan Source	
1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount generalization and an adjustment of the second and a second and
City State ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed Outstanding:
	Semantine and in section of the semiderarial security of the semiderarial
SUBTOTALS This Period This Page (optional)	Secure of many and secure of many and secure of the many and secure of the many and secure of the se
OTALS This Period (last page in this line only)	Same at the second to second and a second annual 2 decreased as a selection and decreased as a selection and decreased as a selection and decreased as a second annual as a selection and decreased as a second annual as a se
Carry outstanding balance only to LINE 3, Schedule D, for this line.	ir no schedule D, carry forward to appropriate line of Summary.

# SCHEDULE C-1 (FEC Form 3X) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on Page \_\_\_\_\_ of Schedule C

Federal Election Commission, Washington, D.C. 20463		<del></del>
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER
Exposing Marxists PAC		C0.0534.016
LENDING INSTITUTION (LENDER)	Amount of Loan	Interest Rate (APR)
Full Name		%
Mailing Address  City State Zip Code	Date Incurred or Established  Date Due	
A. Has loan been restructured? No Yes	If yes, date originally incurre	1 / 000 / 74774
B. If line of credit,	Total Outstanding Balance:	
Amount of this Draw:	balance:	
C. Are other parties secondarily liable for the debt incurred No Yes (Endorsers and guarantors mu	ed? ust be reported on Schedule C.)	
D. Are any of the following pledged as collateral for the I property, goods, negotiable instruments, certificates of stocks, accounts receivable, cash on deposit, or other	deposit, chattel papers,	What is the value of this collateral?
No Yes If yes, specify:		Does the lender have a perfected security
		interest in it? No Yes
E. Are any future contributions or tuture receipts of interection collateral for the loan? No Yes If yes, s		What is the estimated value?
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).	Location of account:	
Date account established:	Address:	
Date account established:	City, State, Zip:	
less from the base of all the standard and the standard a		
F. If neither of the types of collateral described above was the loan amount, state the basis upon which this loan	s pleaged for this loan, or it the was made and the basis on wh	amount pleaged does not equal or exceed ich it assures repayment.
G. COMMITTEE TREASURER		DATE
Typed Name Signature		
H. Attach a signed copy of the loan agreement.		
I. TO BE SIGNED BY THE LENDING INSTITUTION:  I. To the best of this institution's knowledge, the ter	rms of the loan and other inform	ation reporting the extension of the loan
are accurate as stated above.  II. The loan was made on terms and conditions (inc	cluding interest rate) no more fav	
similar extensions of credit to other borrowers of III. This institution is aware of the requirement that a complied with the requirements set forth at 11 CI	a loan must be made on a basis	which assures repayment, and has
AUTHORIZED REPRESENTATIVE	11, 100.02 and 100,142 in Mani	DATE
Typed Name		
Signature Title	е	

SCHEDULE D (FEC Form :	3X)	(Use separate	PAGE OF
<b>DEBTS AND OBLIGATIONS</b>		schedule(s)	FOR LINE NUMBER:
Excluding Loans		for each numbered line)	(check only one) 9
NAME OF COMMITTEE (In Full)		<del></del>	<del></del>
Exposing Marx	ists PAC		
A. Full Name (Last, First, Middle Initia	al) of Debtor or Creditor	Nature of D	Pebt (Purpose):
Mailing Address			
City State	Zip Code		
Outstanding Balance Beginning This	Period		
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
B. Full Name (Last, First, Middle Initial	) of Debtor or Creditor	Nature of D	ebt (Purpose):
D. I dii Itanie (Last, I list, Ithodie linda)	, at sessor of orealist	Nature of D	eot (Fuipose).
Mailing Address			
Maining Audress			
City State	Zip Code		
Outstanding Balance Beginning This	Period		
			•
Amount Incurred This Period	Payment This Period	Outstandir	ng Balance at Close of This Period
Allount mounts (min ) ones			og Datance at Close of This Fellod
C. Full Name (Last, First, Middle Initia	al) of Debtor or Creditor	Nature of D	ebt (Purpose):
Mailing Address			
City	State Zip Code		
	<del></del>		·
Outstanding Balance Beginning This	Period		
Amount Incurred This Period	Payment This Period	Outstandin	g Balance at Close of This Period
		حيا لــ	
		- Controller - Con	
1) SUBTOTALS This Period This Page (d	optional)	>	0000
2) TOTALS This Period (last page this lir	ne number only)	. •	0.0.0.0
			3 ~ 8 V
3) TOTAL OUTSTANDING LOANS from	Schedule C (last page only)		
4) ADD 2) and 3) and carry forward to a	ppropriate line of Summary Page (last page only	y) ▶	0000

### SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

HENRIZED INDEFENDENT CAFENDITORIES	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER Y
Exposing Marxists PAC	C00534016
Check if 24-hour report 48-hour report New report Amends report	t filed on
Full Name (Last, First, Middle Initial) of Payee	Date
Mailing Address	
China To Code	Amount
City State Zip Code	
Purpose of Expenditure  Category/ Type	Office Sought: House State: Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	President  Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Mailing Address	
	Amount
City State Zip Code	
Purpose of Expenditure Category/ Type	Office Sought: House State: Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	President Oppose
Calendar Year-To-Date Per Election	Disbursement For: Primary General
for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	<ul> <li>δ.δ.δ.δ.δ</li> </ul>
(b) SUBTOTAL of Uniternized Independent Expenditures	0.000
(c) TOTAL Independent Expenditures	·
Under penalty of pedury I dertify that the independent expenditures reported herein were no with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	ot made in cooperation, consultation, or concert either, or (if the reporting entity is not a political
Signature Date	0.4 1.5 20.1.4

# SCHEDULE F (FEC Form 3X) ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)

SUBTOTAL of Expenditures This Page (optional).....

TOTAL This Period (last page this line number only).....

POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S) ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE PAGE OF (2 U.S.C. §441a(d)) FOR LINE 25 OF FORM 3X (To be used only by Political Committees in the General Election) NAME OF COMMITTEE (In Full) X DOS INA Full Name of Subordinate Committee coordinated expenditures by a political party committee? ☐ NO YES Mailing Address If YES, name the designating committee: City State ZIP Code Purpose of Expenditure Full Name (Last, First, Middle Initial) of Each Payee Category/ Mailing Address .Type Date State Zip Code Name of Federal Candidate Supported Office Sought: House State: **Amount** Senate District: Presidential Aggregate General Election Expenditure for this Candidate Purpose of Expenditure Full Name (Last, First, Middle Initial) of Each Payee Category/ Mailing Address Type Date State Zip Code Name of Federal Candidate Supported Office Sought: House State: Amount Senate District: Presidential Aggregate General Election Expenditure for this Candidate Purpose of Expenditure Full Name (Last, First, Middle Initial) of Each Payee Category/ Mailing Address Date State Zip Code Name of Federal Candidate Supported Office Sought: House State: Amount Senate District: Presidential Aggregate General Election Expenditure for this Candidate >

#### SCHEDULE H1 (FEC Form 3X)

#### **METHOD OF ALLOCATION FOR:**

- ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds and Nonconnected Committees Only)

NAME OF COMMITTEE (I. F.II)
Exposing Marxists PAC
USE ONLY ONE SECTION, A or B
A. State and Local Party Committees
Fixed Percentage (select one)
Presidential-Only Election Year (28% Federal)
Presidential and Senate Election Year (36% Federal)
Senate-Only Election Year (21% Federal)
Non-Presidential and Non-Senate Election Year (15% Federal)
B. Separate Segregated Funds and Nonconnected Committees
Flat Minimum Federal Percentage
If the committee will allocate using the flat minimum percentage of 50% federal funds, check or
If the committee is spending more than 50% federal funds, indicate ratio below
Federal%
Nonfederal%
This ratio applies to (check all that apply):
Administrative Generic Voter Drive Public Communications Referencing Party Only

SCHEDULE H2 (FEC Form 3X)		
ALLOCATION RATIOS	•	PAGE OF
NAME OF COMMITTEE (In Full)  EXPOSING MAIXISTS PAC		
RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDA ACTIVITIES APPEARING ON THIS REPORT.	TE SUPPORT	
Methods of allocation:		•
<ol> <li>FUNDRAISING activities are allocated using the "funds received met expenses must equal the federal proportion of monies raised.</li> </ol>	hod" where the federal p	proportion of
II. Shared DIRECT CANDIDATE SUPPORT activities are allocated according where the federal proportion of disbursements is based on the benefitivity. For PACs Only: Direct candidate support includes public commissed and nonfederal candidates, regardless of whether there is a rare allocated using a time/space method.	it derived by federal can nunications or voter drive	didates from the ac-
ACTIVITY OR EVENT IDENTIFIER		
ACTIVITY IS:  Fundraising Direct Candidate Support  CHECK IF THE RATIO IS:  New Revised Same as Previously Reported	FEDERAL %	NONFEDERAL %
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
ACTIVITY IS:  Fundraising Direct Candidate Support  CHECK IF THE RATIO IS:  New Revised Same as Previously Reported	%	%
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
ACTIVITY IS:  Fundraising Direct Candidate Support  CHECK IF THE RATIO IS:  New Revised Same as Previously Reported	%	%
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
ACTIVITY IS:  Fundraising Direct Candidate Support  CHECK IF THE RATIO IS:  New Revised Same as Previously Reported	%	%
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %

Same as Previously Reported

Same as Previously Reported

ACTIVITY IS:

New

ACTIVITY IS:

Fundraising

Fundraising
CHECK IF THE RATIO IS:

New

CHECK IF THE RATIO IS:

**ACTIVITY OR EVENT IDENTIFIER** 

Revised

Revised

Direct Candidate Support

Direct Candidate Support

NONFEDERAL %

FEDERAL %

#### **SCHEDULE TRANSFERS ALLOCATED**

	DULE H3 (FEC Form 3X)	
	SFERS FROM NONFEDERAL ACCOUNTS FOR	PAGE OF
ALLO	CATED FEDERAL / NONFEDERAL ACTIVITY	FOR LINE 18a OF FORM 3X
NAME	OF COMMITTEE (In Full)	FOR EACH TOURS OF FORTHWOR
Ex	Posina Marxists PAC	·
	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
- }	MAN / DAB / VANAAA	
	from the self-second describerated the co-the second second	tracked at the state of the state of the state of
BRE	EAKDOWN OF TRANSFER RECEIVED	
i)	Total Administrative	
1		
")	Generic Voter Drive	have been dead have been dead to be a local dead of the sales of the s
1	Exempt Activities	
	Direct Fundraising (List Activity or Event Identifier)	Constitute of the self-week and the self-week an
"	A PRICE LAURING (FIST VERAITA OF EAGUR INCOMPANY	j
	g)	-
	b)	
		The state of the s
	c) Total Amount Transferred For Direct Fundraising	Sansaharan Baran Bar
v)	Direct Candidate Support (List Activity or Event Identifier)	
j	Section of the sectio	
	a)	
	b)	
	Towns of the contract of the c	Baran Manarallaran Manarallaran Manarallaran Sanarallaran Manarallaran eta Mararallaran eta Mararallaran eta M Baran Manarallaran eta Manarallaran eta Manarallaran eta Manarallaran eta Manarallaran eta Manarallaran eta Ma
	c) Total Amount Transferred For Direct Candidate Support	
		· ·
vi)	Public Communications Referring Only to Party (Made by PAC)	
	TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED	
TOTAL	This Period (Administrative)	
	Special and a second se	
TOTAL	This Period (Generic Voter Drive)	
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#### SCHEDULE H4 (FEC Form 3X)

## DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

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#### SCHEDULE H5 (FEC Form 3X)

#### TRANSFERS OF LEVIN FUNDS RECEIVED FOR ALLOCATED FEDERAL ELECTION ACTIVITY

NAME OF COMMITTEE (in Full)  EXPOSING MARXISTS PAC  NAME OF ACCOUNT  DATE OF RECEIPT  OUTER REGISTRATION  Total Amount Transferred for Voter Registration  II) Voter Registration  Total Amount Transferred for Voter ID  GENERIC CAMPAGN ACTIVITY  Total Amount Transferred for GOTV  NAME OF ACCOUNT  DATE OF RECEIPT  TOTAL AMOUNT TRANSFERRED  OUTER ID  O	be used by State, Bistrict and Local Party Committees Only)	PAGE OF FOR LINE 18b OF FORM 3.
BREAKDOWN OF THIS TRANSFER  i) Voter Registration Total Amount Transferred for Voter Registration	IAME OF COMMITTEE (in Full)	POST ENGL 160 OF TOTAL O
BREAKDOWN OF THIS TRANSFER  i) Voter Registration Total Amount Transferred for Voter Registration  ii) Voter ID Total Amount Transferred for Woler ID  WOTER ID Total Amount Transferred for Generic Campaign Activity Total Amount Transferred for Generic Campaign Activity  NAME OF ACCOUNT  DATE OF RECEIPT  TOTAL AMOUNT TRANSFERRED  VOTER ID  TOTAL AMOUNT TRANSFERRED  VOTER ID  VOTER ID  VOTER ID  VOTER ID  VOTER ID  VOTER ID  TOTAL AMOUNT TRANSFERRED  VOTER ID  TOTAL AMOUNT TRANSFERRED  VOTER ID  VOTER ID  VOTER ID  VOTER ID  VOTER ID  VOTER ID  TOTAL Amount Transferred for Voter ID  III) GOTV  Total Amount Transferred for Generic Campaign Activity  TOTAL This Period (Voter Registration)  TOTAL This Period (Voter ID)  TOTAL This Period (GOTV)	Exposing Marxists PAC	
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TOTAL This Period (Total Amount of Transfers Received)	TOTAL This Period (Total Amount of Transfers Received)	

# SCHEDULE H6 (FEC Form 3X) DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS FOR ALLOCATED FEDERAL ELECTION ACTIVITY

(To be used by State, District and Local Party Committees Only)

FOR LINE 30a OF FORM 3X

IAME OF COMMITTEE (In Full)		
Exposing Marxists PAC		
A. Full Name (Last, First, Middle Initial) / Full Organization Name		Type of Allocated Activity or Event:
	•	Voter Registration GOTV
		Voter ID Generic Campaign
Mailing Address		Allocated Activity of Event Year-To-Date
City State Zip Code	T	
Purpose of Disbursement	Category/ Type	Date
FEDERAL SHARE + LEVIN SHA	ARE	= TOTAL AMOUNT
B. Full Name (Last, First, Middle Initial) / Full Organization Name		Type of Allocated Activity or Event:
The state of the s		Voter Registration GOTV
		Voter ID Generic Campaign
Mailing Address		Allocated Activity or Event Year-To-Date
City State Zip Code		
Purpose of Disbursement	Category/ Type	Date / Vavavavavavavavavavavavavavavavavavavav
FEDERAL SHARE + LEVIN SHA	ARE .	= TOTAL AMOUNT
C. Full Name (Last, First, Middle Initial) / Full Organization Name		Type of Allocated Activity or Event:
C. I dii Ivaliie (Last, I list, miladie lilida) / Fun OlyaliiZalioti Ivaliie		Voter Registration GOTV
1		Voter ID Generic Campaign
Mailing Address		Allocated Activity or Event Year-To-Date
City State Tie Made		
City State Zip Code	-	· ·
Purpose of Disbursement	Category/ Type	Date / Date
FEDERAL SHARE + LEVIN SHA		= TOTAL AMOUNT
	مراجعات شعبات	TOWNE AND OTHER
UBTOTAL of Shared Federal and Levin Activity This Page		
	DC	
FEDERAL SHARE + LEVIN SHA	HE	TOTAL AMOUNT
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OTAL This Period (last page for each line only)(Federal share to 30(a)(i) and FEDERAL SHARE		
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OTAL This Period (last page for each line only)(Federal share to 30(a)(i) and	Levin share to	30(a)(ii))

PAGE

## SCHEDULE L (FEC Form 3X)

**AGGREGATION PAGE: LEVIN FUNDS** 

E	TE OF COMMITTEE (In Full)  ADB SING MAIXISTS TEOF ACCOUNT	PAC	
,			
L	<u> </u>	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1.	RECEIPTS FROM PERSONS		
	(a) Itemized(Use Schedule L-A)		
	•		
	(b) Uniternized		
	(c) Total		
	( )		
2.	OTHER RECEIPTS		
3.	TOTAL RECEIPTS		
J.	(Add Lines 1c and 2)		
4.	TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
	(a) Voter Registration		
			Asserting the second and second secon
	(b) Voter ID		
	(c) GOTV	`	
		Control from the control of the cont	
	(d) Generic Campaign		
	(e) Total		
	(0)		
5.	OTHER DISBURSEMENTS		
6.	TOTAL DISBURSEMENTS		
	(Add Lines 4e and 5)		
_			
7.	BEGINNING CASH ON HAND(tor Column B, use cash as of January 1st)		
_			
8.	RECEIPTS(from Line 3)		All and the stand of the stand
_	CLIDITATAL		
9.	SUBTOTAL(Add Lines 7 and 8)		
10	DIODI IDOCALINITO	to make a ma	
10.	DISBURSEMENTS(From Line 6)		Land market Director de met Domiton de met Description
14	ENDING CASH ON HAND		
11.	(Subtract Line 10 From Line 9)		
		•	

#### SCHEDULE L-A (FEC Form 3X) ITEMIZED RECEIPTS OF LEVIN FUNDS

Use separate schedule(s) for each category of the Aggregation Page

FOR LINE NUMBER: (check only one) Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or far commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Date of Receipt Mailing Address Amount of Each Receipt this Period City State Zip Code Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt В. Mailing Address Amount of Each Receipt this Period City State Zip Code Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt Mailing Address Amount of Each Receipt this Period City State Zip Code Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt D. Mailing Address Amount of Each Receipt this Period City State Zip Code Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

PAGE

OF

# SCHEDULE L-B (FEC Form 3X)

Use separate schedule(s)

FOR LINE NUMB	ER:	PAG	E		OF	
(check only one)		4a 4h		4c	5	

OF LEVIN FUNDS	for each category of the Aggregation Page	(check only one) 4a 4c 5				
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.						
NAME OF COMMITTEE (IN Full)  EXPOSING MARXISTS P	M					
Full Namé (Last, First, Middle Initial) / Full Organization NA.	Name	Date of Disbursement				
Mailing Address						
City State	Zip Code	Amount of Each Disbursement this Period				
Purpose of Disbursement						
Full Name (Last, First, Middle Initial) / Full Organization NB.	lame	Date of Disbursement				
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City State	Zip Code	Amount of Each Disbursement this Period				
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TOTAL This Period (last page this line number only)						

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Washington, D.C.



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(8/2013)

## **Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS** The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt **Hand Delivered** Postmarked **USPS First Class Mail** Postmarked (R/C) USPS Registered/Certified **USPS Priority Mail** Postmarked **USPS Priority Mail Express** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): Next Business Day Delivery Date of Receipt Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): PREPARER